2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742263

Entity Name: SADDLE CLUB GARDEN APARTMENTS AT BONAVENTURE 41 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O MIAMI MANAGEMENT, INC.
1145 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323

Current Mailing Address:

C/O MIAMI MANAGEMENT, INC
1145 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323 US

FEI Number: 59-1913101

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 NORTH COMMERCE PARKWAY
WESTON, FL 33326 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent | Date

Officer/Director Detail :

Title	OFFICER	Title	S
Name	CARFI, ALDO	Name	SAMOTNY, ESTELLE
Address	C/O MIAMI MANAGEMENT, INC 1145 SAWGRASS CORPORATE PKWY	Address	C/O MIAMI MANAGEMENT, INC 1145 SAWGRASS CORPORATE PKWY
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	SUNRISE FL 33323
Title	P	Title	T
Name	LINETT, JOYCE	Name	WERNIKOFF, RITA
Address	C/O MIAMI MANAGEMENT, INC 1145 SAWGRASS CORPORATE PKWY	Address	C/O MIAMI MANAGEMENT, INC 1145 SAWGRASS CORPORATE PKWY
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	SUNRISE FL 33323
Title	OFFICER		
Name	DE LA TORRE, MYRIAM		
Address	C/O MIAMI MANAGEMENT, INC. 1145 SAWGRASS CORPORATE PKWY		
City-State-Zip:	SUNRISE FL 33323		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOYCE LINETT   PRESIDENT   03/17/2017

Electronic Signature of Signing Officer/Director Detail | Date